

EVS/IVR MESSAGES

ELIGIBILITY STATUS

EVS/IVR issues one or more of the following eligibility statuses, depending upon the recipient's entitled benefits:

- Medicare is primary payer. Providers may not balance bill recipients.
- Eligible for date of service.
- Not eligible for date of service
- Recipient has other health insurance. Policy number(s): Phone number: The insurance company listed should be billed prior to State Medicaid. For further information, call 767-1773.
- Recipient has Hospice benefits. Facility name. Facility phone number.
- Recipient is in HealthChoice. MCO name. MCO phone number.
- Recipient is in PACE Program. Program name. Program phone number.
- Recipient is in the Rare and Expensive Case Management Program (REM). All services for REM are reimbursed on a fee-for-service basis. Contact the REM Program at 1-800-565-8190
- Recipient is a Qualified Medicare Beneficiary (QMB). Medicare is primary payer. Providers may not balance bill recipients.
- Recipient's benefits are limited to family planning services only. Abortion and infertility services are not covered.
- Recipient covered for approved emergency services on approved dates only
- Abortion is not covered.
- Recipient in a facility. <Facility name> <Facility phone number>
- Recipient is eligible for Special Waiver Services. <Waiver name> <Waiver phone number> For more information, call 410-767-1446.
- Valid card number: <Card #> A duplicate MA card has been issued and the previous card is no longer valid.
- Current Medical Assistance # <Recipient Number>
- Recipient has PAC primary adult care coverage. <MCO name> <MCO Phone Number>. Specialty mental health and HIV drugs are fee for service
- Recipient receives Medicare Part B premium payment only.
- Recipient has Pharmacy and Outpatient Mental Health coverage only.

- Recipient is enrolled in Medicare Advantage Plan. Benefit payor is <MCO name> <MCO Phone Number>.
- Recipient has PAC on date of service with additional fee-for- service coverage for all other claims. PAC Primary Care Benefit Payor is <MCO name> <MCO Phone Number>.
- Healthchoice, stop loss <MCO name> <MCO Phone Number>. Recipient is in an MCO, however, the MA Program, not the MCO, is responsible for inpatient hospital claims. Call 410-767-5325 for additional information.

DATE OF SERVICE

- **PLEASE REPEAT THE DATE** – Invalid date format has been entered. EVS/IVR will deliver this message if invalid date format has been entered. EVS/IVR will re-prompt for the Date of Service only.
- **FUTURE DATA INQUIRIES BEYOND END OF CURRENT CALENDAR MONTH NOT ALLOWED, PLEASE REPEAT THE DATE** – Error for edit checks on the Date of Service. This check will be done immediately when the Date of Service is entered. EVS/IVR will deliver this message if the Date of Service is in the future past the last day of the current month's date of inquiry. EVS/IVR will re-prompt for the Date of Service only.
- **ONLY 12 MONTHS HISTORY AVAILABLE. PLEASE REPEAT THE DATE** – Error for edit checks on the Date of Service. This check will be done immediately after the Date of Service is entered. EVS/IVR will deliver this message if the date is more than 1 year in the past. EVS/IVR will re-prompt for the Date of Service only.

ERROR RESPONSE

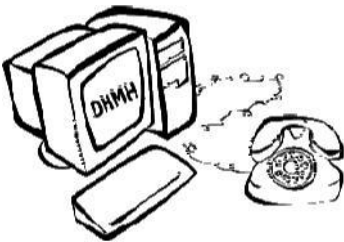
- **INVALID PROVIDER, <Provider Number Entered>, PLEASE REPEAT YOUR ENTRY** – Error for edit checks on the Provider Number. This check will be done immediately when the Provider Number is entered. If edit/validation fails (first attempt), EVS/IVR will play this message.
- **INVALID RECIPIENT, <Recipient Number Entered>, PLEASE REPEAT RECIPIENT NUMBER AND NAME CODE** - Error for edit checks on the Recipient Number. This check will be done immediately when the Recipient Number + Name Code is entered. EVS/IVR will deliver this message if the Recipient Number + Name Code is not 13 digits, numeric, or 21 digits, numeric or not present in the Recipient Number file.
- **INVALID SOCIAL SECURITY NUMBER, <SSN Entered>, PLEASE REPEAT SOCIAL SECURITY NUMBER AND NAME CODE** – Error for edit checks on the SSN. This check will be done immediately when the SSN + Name Code is entered. EVS/IVR will deliver this message if the SSN + Name Code is not 11 digits, numeric. If the user enters **9 #**, EVS/IVR will bypass the SSN search and prompt for Recipient Number search.
- **INVALID <Data Entered>, CALL ENDED, HAVE A GOOD DAY** – EVS/IVR will deliver this message and disconnect if multiple attempts to enter date have failed edits/validation.
- **NO DATA ENTERED, CALL ENDED, HAVE A GOOD DAY** – No data has been entered following the second prompt to enter.
- **INVALID NAME CODE** – Name Code does not match first two digits of the last name on file.



Medical Care Programs

ELIGIBILITY VERIFICATION SYSTEM

USER’S GUIDE



Maryland Department of Health and  
Mental Hygiene

Larry Hogan, Governor  
Boyd Rutherford, Lt. Governor  
Van Mitchell, Secretary

March 2015

PROVIDER # \_\_\_\_\_

EVS NUMBER:  
1-866-710-1447

INTRODUCTION

The Eligibility Verification System (EVS)/Interactive Voice Response (IVR) is a telephone-inquiry system that enables health care providers to quickly and efficiently verify a Medicaid recipient's current eligibility status. A Medical Assistance, Pharmacy Assistance, or Qualified Medicare Beneficiary card alone does not guarantee that a recipient is currently eligible for Medicaid benefits. You can use EVS to quickly verify a recipient's complete status. *To ensure recipient eligibility for a specific Date of Service, you must use EVS/IVR prior to rendering service.*

EVS/IVR is fast and easy to use, and it's available 24 hours a day, 7 days a week. EVS/IVR verifies eligibility and during each call you can verify as many recipients as you like. EVS provides you with the capability of verifying past dates of eligibility for services rendered up to 1 year ago. Also, if the Medical Assistance Identification Number (Recipient Number) is not available, you can use the recipient's Social Security Number and Name Code to check eligibility and obtain the ID number. EVS is an invaluable tool to Medical Assistance providers for ensuring accurate, timely eligibility information for claim submissions

FURTHER ASSISTANCE

- > Provider Relations Division, Monday - Friday 8:00 am - 5:00 pm.  
410-767-5503 or 1-800-445-1159
- > eMedicaid Website [www.emdhealthchoice.org](http://www.emdhealthchoice.org)
- > TTYforDisabled. 1-800-735-2258

EVS/IVR REQUIREMENTS

- > A touchtone phone
- > The EVS access telephone number
- > Your Medical Assistance Provider or NPI Number
- > Recipient Number and Name Code or SSN and Name Code
- > Date of Service if other than current date

HELPFUL TIPS

- > END DATA ENTRY. To signal the end of your data entry and have the EVS process your data, press the pound “#” key once or wait for the EVS system to advance automatically.
- > NO DATA ENTERED. If you do not enter data within a pre-determined time period after a prompt, the EVS re-prompts you. If failure to enter continues, EVS disconnects the call
- > ERROR CORRECTION. If you make a mistake, press the asterisk button “ \* ” once. EVS disregards the incorrect information and repeats the prompt.
- > ENDING YOUR CALL. Press key when prompted “to end the call”. The system responds, “Call Ended. Have a good day,” and disconnects your call. The system will end your call in the event of continuous data entry errors of critical information including: Provider Number, Recipient Number, SSN or Date of Service.
- > SSN SEARCH. If you enter zero, pound “0 #”, the system bypasses the Recipient Number search and will prompt you for an SSN search.

- > RECIPIENT NUMBER SEARCH. If you enter nine, pound “9 #”, the system bypasses the SSN search and prompts you for a Recipient Number search.
- > PAST DATE OF SERVICE. You may enter a past Date of Service immediately following the Recipient Number + Name Code or SSN + Name Code. You must enter the Date of Service in MMDDCCYY format.
- > DATA ENTRY FOR CHARACTERS Q AND Z AND 1 LETTER LAST NAME. The characters Q and Z are not available on all touchtone phones so enter the digit 7 for the letter Q and digit 9 for the letter Z. Use a zero for space if recipient has only one letter in the last name. Example: Malcolm X; Name Code = XO
- > DATA AVAILABILITY. EVS provides current information up to the previous business day. Carefully listen to the complete eligibility status before ending the call so that you do not miss any of the EVS message and obtain a confirmation #.
- > CONFIRMATION NUMBER. For every successful eligibility check made during the call, the EVS provides a confirmation number. Carefully listen and write this number down as it is your record of the completed eligibility check and must be provided in the event of a claim dispute.

HOW TO USE EVS/IVR

1 DIAL THE EVS.

Call the EVS access telephone number by dialing:  
1-866-710-1447

EVS answers with the following welcome message:

“WELCOME TO THE MARYLAND MEDICAID ELIGIBILITY VERIFICATION SYSTEM. FOR PAST ELIGIBILITY STATUS CHECK, YOU MUST ENTER MONTH, DAY AND 4 POSITION YEAR. TO END THE CALL, PRESS 1.”

OPTIONAL EVS/IVR OR STATE ANNOUNCEMENT(S)

“PLEASE ENTER NPI OR PROVIDER NUMBER”

Once familiar with EVS/IVR, you may bypass the initial message by going directly to STEP 2. You may also hear an Announcement Message following the welcome message. It is recommended that you listen to the complete message during your first call of the day since additional information may be provided.

2 PROVIDER NUMBER DATA ENTRY.

Enter your Provider Number and press pound “#”.

EXAMPLE: 1 2 3 4 5 6 7 8 0 #  
Provider Number

EVS replies with the following prompt:

“ENTER RECIPIENT NUMBER AND NAME CODE”

or an error message if an invalid Provider Number is entered.

3A RECIPIENT NUMBER SEARCH.

For Current Eligibility, follow the example: For Current Eligibility. Or, for Past Eligibility up to one year, follow the example: For Past Eligibility.

EXAMPLE: For Current Eligibility. Enter the Recipient Number followed by the Name Code and press pound “#”.

For recipient Mary Stern, you would enter:

1 2 3 4 5 6 7 8 9 0 1 7 8 #  
Recipient Number Name Code

\*Name Code-where 7 is for the S in Stern and 8 is for the T in Stern on your telephone keypad.

EVS/IVR responds with current eligibility information or an error message if incorrect information has been entered

EXAMPLE: For Past Eligibility. You can also optionally search a recipient's past eligibility status up to 1 year. Do this by entering a date as far back as 1 year from the current date using MMDDCCYY format. Enter the Recipient Number followed by the Name Code and Date of Service and press pound “#”.

For recipient Mary Stern, where the Date of Service was April 1, 2012, you would enter:

1 2 3 4 5 6 7 8 9 0 1 7 8 0 4 0 1 2 0 1 2 #  
Recipient Number Name Code Date of Service

NOTE: EVS will respond with eligibility information for the Date of Service requested or an error message if incorrect information has been entered. If you enter the date incorrectly, EVS re-prompts you to reenter only the date. However, at the prompt, you can return to the ENTER RECIPIENT NUMBER AND NAME CODE prompt by pressing nine, pound “9 #”.

3B SSN SEARCH (RECIPIENT NUMBER NOT AVAILABLE).

If you do not have the Recipient Number at the Recipient Number prompt, press zero, pound, “0 #” and the system prompts you for an SSN search. Using a recipient's SSN and Name Code, you may search current eligibility or optionally search past eligibility up to 1 year. To search past eligibility, follow the Name Code data entry with the Date of Service in MMDDCCYY format. EVS prompts you with the following: “ENTER SOCIAL SECURITY NUMBER AND NAME CODE”

EXAMPLE: For Current Eligibility. Enter the recipient's SSN and Name Code. For Mary Stern, you would enter:

1 1 1 2 2 3 3 3 3 7 8 #  
SSN Name Code

EXAMPLE: For Past Eligibility. Enter the recipient's SSN, Name Code, and Date of Service.

For recipient Mary Stern, where the Date of Service was April 1, 2012, you would enter:

1 1 1 2 2 3 3 3 3 7 8 0 4 0 1 2 0 1 2 #  
SSN Name Code Date of Service

NOTE: If you have entered a valid SS number which is on file, and the recipient is currently eligible for Medical Assistance; EVS will provide you with a current eligibility status and the valid Recipient Number. You should record the Recipient Number the system provides. Social i Security Numbers are not on file for all recipients.

4 MCO TRANSFER FEATURE.

If the recipient is eligible for services and a member of a Managed Care Organization, the system will provide the MCO number and the option to transfer the call.

When an MCO is returned, and the transfer option is relevant, the eligibility response is:

“TO REPEAT THE ELIGIBILITY INFORMATION, PRESS 1; TO REPEAT JUST THE CONFIRMATION NUMBER, PRESS 2; TO CONTINUE, PRESS 3”

When you continue, you will hear:

“TO ENTER ANOTHER RECIPIENT, PRESS 1; TO TRANSFER TO THE MCO, PRESS 2; TO END THE CALL, PRESS 3”

If no MCO is returned, and the transfer option is not relevant, the eligibility response is:

“TO REPEAT THIS INFORMATION, PRESS 1; TO RECEIVE YOUR CONFIRMATION NUMBER FOR THIS RECIPIENT ID AND ENTER ANOTHER RECIPIENT, PRESS 2, TO RECEIVE YOUR CONFIRMATION NUMBER FOR THIS RECIPIENT ID AND END THIS CALL, PRESS 3”